

DEPARTMENT OF BUSINESS AND INDUSTRY / DIVISION OF INDUSTRIAL RELATIONS

Mine Safety and Training Section

400 West King Street Suite #210, Carson City, NV 89703

Phone (775) 684-7085 Fax (775) 687-8259

Email: mines@business.nv.gov Web Page: <http://dirweb.state.nv.us/>

Technical Assistance Request Form*

Date: _____ Mine Inspector: _____ County: _____

Company Name: _____ Mine Name: _____

Contact Person: _____ Phone: _____ Fax: _____

Mine ID: _____

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Mine Inspection Request:

☐ Regular Inspection

☐ Courtesy Inspection

☐ Last Inspection Date

☐ New Inspection

☐

Ground Resistivity Request:

☐ Re-Grounding

☐ Number of Groundings Needed: _____

☐ Date of Last Ground Resistivity Test: _____

☐ New Grounding

☐ Number of Groundings Needed: _____

☐

Boiler/Pressure Vessel Inspection Request:

Number:

Last Inspection Date or New Installation?

☐ Pressure Vessel

☐ Boiler

☐ Elevator

☐

Industrial Hygiene Request for monitoring materials:

Number

Date Needed

☐ Dust Cassettes

☐ Metals Cassettes

☐ Other

☐

Industrial Hygiene Request for Survey:

☐ Dust/Silica

☐ Noise

☐ Other (explain): _____

☐

Industrial Hygiene Request for Information:

☐ Status of monitoring results: (Description) _____

(Date Conducted) _____

☐ Exposure/TLV calculations: _____

☐ Substance Information: _____

☐ Monitoring/Analytical Methods: _____

☐ Personal Protective Equipment: _____

☐ Monitoring Equipment: _____

☐ Other (noise, engineering, ventilation, etc.) _____

☐

Request for printed material:

***Note:** Please mail or fax this request to our office (also obtain a copy for MSHA verification if needed)

Office use only: Person Taking Request: _____

Date received: _____ **Date of Response/Date Sent:** _____